



STUDENT ATTENDANCE RECORD

PAY PERIOD FROM _____ TO _____

NAME [REDACTED]

	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	
IN								
OUT								
IN								
OUT								TOTAL
TOTAL								

	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	
IN								
OUT								
IN								
OUT								TOTAL
TOTAL								

TOTAL HOURS WORKED FOR PAY PERIOD	
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I CERTIFY THAT THIS RECORD IS ACCURATE.

EMPLOYEE SIGNATURE _____

SUPERVISOR SIGNATURE _____

PLEASE FILL OUT THIS FORM COMPLETELY